COMBINED DECLARATION FOR (Includes Reference to PCT Internations)	ATTORNEY'S OOCKET NUMBER CLARK, D-1									
	amed inventor, I hereby declare that:	below next to my name,								
I believe I am the or	riginal, first and sole inventor (if only ness are listed below) of the subject ma	one name is listed below) or an	original, first and joint th a patent is sought on							
CABLE COUPLING										
the specification of which (check only one item below);										
[X] is a										
[] wa	was filed as United States application									
Sea	Serial No.									
া										
and	I was amended									
o _n	·	(if applicable).								
[] wa	s filed as PCT international application									
Mu	mber									
on										
ans	I was amended under PCT Article 19									
on		(if applicable).								
-	have reviewed and understand the co any amendment referred to above.	ntents of the above-identified spec	cification, including the							
I acknowledge the dury to disclose information which is material to the examination of this application in accordance with Title 37, Code of Foderal Regulations, §1.56(a).										
patent or inventor's c the United States of inventor's certificate of	priority benefits under Title 35, Ur ertificate or of any PCT international America listed below and have also or any PCT international application(s) d by me on the same subject matter ha	application(s) designating at least identified below any foreign applies) designating at least one country	one country other than lication(s) for patent or other than the United							
PRIOR FOREIGN/PCT APPLIC	ATION(S) AND ANY PRIORITY CL	AIMS UNDER 35 U.S.C. 119:								
COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119							
			[] YES [] NO							
			(]YES (]KO							
			[]YES (]NO							
			[]YES []NO							
			[]YES INO							

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)								ATTORNEY'S DOCKET NUMBER CLARK, D-1				
I hereby claim the benefit under Title 35, United States Code, Section 119(c) of any United States provisional application(s) listed below.												
	(Application	Number)			(Filing Dat	e)						
I hereby claim the berefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofer as the subject matter of each of the claims of this application is not disclose in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112. I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:												
PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C., 120:												
U.S. APPLICATIONS						STATUS (Chock One)						
U.S. APPLICATION NUMBER			U.S. FILING DATE			датиртад		руюнд		ОЗИООИАЯА		
		İ										
	PC	CAPPLICATIONS DESIGNAT	NG THE	E U.N.								
PCT APPLICATION NO. PCT FI		PCT FILING DATE	TE U.S. SERIAL NU ASSIGNED									
									•			
ALLISON C. COLLARD, Registration No. 22,532; CHRISTOPHER B. GARVEY, Registration No. 31,015 EDWARD R. FREEDMAN, Registration No. 26,048; FREDERICK J. DORCHAK, Registration No. 29,298 ELIZABETH COLLARD RICHTER, Registration No. 35,103 KURT KELMAN, Registration No. 18,628 WILLIAM C. COLLARD, Reg. No. 38,411 Send Correspondence to: COLLARD & ROE, P.C. Direct Telephone Calls to:												
1077 Northern Boulevard Custo Roslyn, New York 11576					er No.: 25889			(name and telephone number) (516) 365-9802				
2	FULL NAME OF INVENTOR	FAMILY NAME CLARK			PIRST GIVEN NAME DARREN				SECOND GIVEN NAME			
0	RESIDENCE & CITIZENSKIP	city Mt. Sinai			STATE OR FOREIGN COUNTRY NEW YORK				COUNTRY OF CITIZENSHIP UNITED STATES			
j	Post office address	POST OFFICE ADDRESS 4 'Sotham Ct.			CITY Mt. Sinai			STATE & ZIP CODE/COUNTRY New York 11766 USA				
2	FULL NAME OF INVENTOR	family name			FIRST GIVEN NAME			ABCOND GIVEN NAME				
0	residence & Citizenship	CITY			STATE OR FOREIGN COUNTRY				COUNTRY OF CITIZENSINF			
2	POST OFFICE ADDRESS	POST OFFICE ADDRESS			CITY			STATE & ZIP CODE/COUNTRY				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or application or application is suing thereon.												
SIGNATURE OF INVENTOR 201				SIGNATURE OF INVENTOR 202			SIGNATURE OF INVENTOR IN					
DATE 7-11-03			3TAC			DATE						